

REMARKS

Responsive to the outstanding Office Action, applicant has carefully studied the Examiner's rejections. Favorable reconsideration of the application in light of the following amendments and detailed arguments is respectfully requested.

The claims pending in this application are claims 1-15. Claims 1 and 10 have been amended herein, and claims 11 and 13 have been canceled. It is respectfully submitted that no new matter has been presented in these amendments.

REJECTIONS UNDER 35 USC §102

Claims 1-11 were again rejected under 35 USC 102(b) as being unpatentable by Douglas et al. (US 6,039,688). The Examiner goes on to show a detailed listing of the present claim elements that he believes are disclosed by Douglas.

Claim 1 defines a method of managing the use of a medical insurance scheme by members thereof. The scheme includes receiving a premium or contribution payment from members of the medical insurance scheme and providing to members who pay such premiums or make such contributions, relevant health services, and/or assistance in defraying expenses incurred in connection with rendering such relevant health services. The scheme further includes defining a plurality of health-related facilities and/or services, offering the facilities and/or services to members of the medical scheme, monitoring use of the facilities and/or services by each member, allocating a credit value to each member according to their use of the facilities and/or services, and allocating rewards to members who accumulate credit values exceeding predetermined values.

The examiner previously stated that Douglas (col 6; lines 7-13) discloses “defining a plurality of health-related facilities and/or services” and that it further (col 6; lines 27-38) discloses offering the facilities and/or services to members of the medical aid scheme. The Examiner states that the reasons for rejection are unchanged from the previous action.

Claim 1 has been amended herein to specify that the plan relates specifically to medical insurance. To this end claim 1 has been further defined to indicate that the plan includes receiving a premium or contribution payment from members of the medical insurance scheme; and providing to members who pay such premiums or make such contributions, relevant health services, and/or assistance in defraying expenses incurred in connection with rendering such relevant health services.

Applicant previously argued, in detail, that the reference applied was not applicable to the present situation, in that the present invention pertained to a medical insurance plan and the applied reference was not so directed. The Examiner responded that this distinction was given no patentable weight, in that the medical insurance was only mentioned in the preamble and not defined in the body of the claim. In response thereto, claim 1 has been amended to clearly define that the invention is a medical insurance scheme. Claim 1 has been amended to directly state this, and also to include claim limitations which clearly define that this is a medical insurance scheme.

Therefore, it is respectfully submitted that applicants previously presented arguments, an amended version of which are presented below, should be reconsidered based upon these amendments to the claims.

As a further note, it is important to consider that a significant advantage of operating this methodology in the context of a medical insurance scheme is that the applicant has found that by encouraging and rewarding members to look after their health, the quantum of medical insurance claims made to the medical insurance scheme is significantly reduced. This is obviously very advantageous to the managers of the medical insurance scheme.

It is respectfully submitted that the Douglas patent describes a system for monitoring compliance. The program of Douglas is set up for an individual by a doctor, for example, and the individual's compliance with the program is monitored by the individual periodically logging into the system to enter details regarding their performance. Thus, it is respectfully submitted that the Douglas patent is concerned with a monitoring system.

It is submitted that Douglas does not disclose the actual offering of health-related facilities and/or services to the individual, as is claimed in claim 1 of the present application. Rather, the individual is told to comply with a program and once they have done this they enter this information into the system.

In contrast to the monitoring system disclosed in Douglas, the present invention provides the means to the individual to comply with the program rather than just instructing the individual to comply and monitoring the individual's response. In practice, this becomes the difference between a successful motivational program and an unsuccessful one. Rather than just telling the individual what to do and then sifting back and waiting for the individual to state that this has been done the present invention actually provides the individual with the tools to comply with the program.

It is further submitted that it is not surprising to one skilled in the art that the Douglas document does not disclose these elements as the Douglas document is directed towards a computerized system with the focus being on the computerized system. In contrast to this, the present invention as claimed is focused on the methodology to enhance member compliance, again as opposed to monitoring such compliance. In short, nowhere in the Douglas document is the offering of health-related facilities and/or services to the members of the medical aid scheme disclosed, as is claimed in independent claim 1 of the present invention.

In addition, independent claim 1 further defines that the provider of such medical scheme undertakes liability in return for a premium or contribution, and provides to members who pay such premiums or make such contributions, relevant health services, and/or assistance in defraying expenses incurred in connection with rendering such relevant health services. Douglas does not disclose this. The applicant wishes to point out that the examiner did not in fact give any reference in the official action as to where, in the examiner's opinion, this is disclosed and is of the view that this is because it is not disclosed.

Additionally, the applicant would also like to point out to the examiner that Douglas does not in any way deal with managing the use of a medical scheme by members thereof, rather the Douglas document deals with a computerized system for behavior modification.

Any dependent claims not specifically mentioned above are thus believed to be allowable based, at least, upon their dependence from allowable base claims as discussed above.

In the light of the above, the applicants submit that the claims are both new and inventive in the light of the cited prior art and the applicant respectfully requests that the application be granted.

REJECTIONS UNDER 35 USC §103

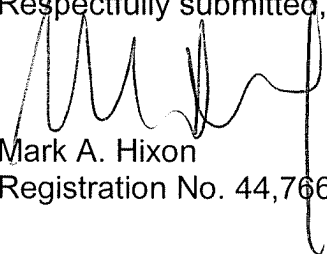
The Examiner rejected claim 12 under 35 USC §1103 as being unpatentable over Douglas in view of US 5,867,821 to Ballantyne. As claim 12 depends from a claim that is believed to be allowable, as discussed above, it is respectfully submitted that this claim is also allowable.

SUMMARY

Claims 1-10, 12 and 14-15 are thus believed to be allowable. It is therefore submitted that the application is now in condition for allowance, and action towards that end is respectfully requested.

Should the Examiner wish to modify the application in any way, applicant's attorney suggests a telephone interview in order to expedite the prosecution of the application.

Respectfully submitted,



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